

PM Center Study 2005

Diary of Diet, Hours Outdoors and Smoke Exposure

(To be administered by the technician)

Participant's Initials: _____ ID: _____

Date: _____ Visit #: _____ Tech: _____

Medication in the last 48 hours: yes / no

Vitamins in last 48 hours: yes / no

Time Outdoors:

Time outside 0-24 hours ago: _____ hours

Time outside 24-48 hours ago: _____ hours

Second hand smoke exposure: (circle one) (if trace or more, give hours)

0-24 hours ago: none, trace, minimal, moderate, severe, incapacitating

24-48 hours ago: none, trace, minimal, moderate, severe, incapacitating

Diet:

Today

Exposure Day

Day Before Exposure

- Breakfast

- Lunch

- Dinner